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Admitted in Florida
Admitted in New Jersey
Admitted in Pennsylvania
Admitted in Ohio
Admitted in Illinois

October 4, 2006

David D. Bird
Clerk of the Court
United States Bankruptcy Court
District of Delaware
824 Market Street
5th Floor
Wilmington, DE 19801

Re: WR Grace Bankruptcy

Dear Sir:

Enclosed please find claim forms which you sent to us. You have us down as counsel but we have no record of their ever having been our clients.

Very truly yours,

Lipsitz Green Scime Cambria LLP

By: Joseph T. Kremer, Esq.

/ek

Encl.

Writer's Extension: 450
Writer's Direct Fax: 716-855-1580
E-Mail: jkremer@lglaw.com

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
<p>Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): SHARPE, JR, RICHARD E</p> <p>Name and address where notices should be sent: LIPSITZ GREEN FABRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-390</p> <p>10321069074632</p> 		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____
THIS SPACE IS FOR COURT USE ONLY		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:
PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)		
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.		
PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)		
<p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <ol style="list-style-type: none"> 1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates: <ol style="list-style-type: none"> a. Title of Case: _____ b. Court Where Complaint was Filed: _____ c. Court Where Case was Pending on April 2, 2001: _____ d. Case Number: _____ e. Date Complaint was Filed: _____ f. Name of Your Legal Counsel: _____ g. Address of Your Legal Counsel: _____ _____ _____ 		

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	
NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): ANGEL ONE, EMMETT P	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FRAHINGER ROIL SALISBURY & CAMBRIA L 42 DELAWARE AVENUE SUITE 300 BUFFALO NY 14202-390 10321069085219	THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed:	_____
c. Court Where Case was Pending on April 2, 2001:	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (the injured person or other person or entity to whom the Debtor(s) owe money or property): OSBORNE, MATTHEW J	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FABRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240	THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number: 10321069036889		If primary party is deceased, indicate date of death:

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed:	_____
c. Court Where Case was Pending on April 2, 2001:	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____ _____ _____

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): SMITH, KENNETH J	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FARRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069036890	THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I**(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)**

Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. **AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.**

PART II**(To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)**

Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.

I. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:

- a. Title of Case: _____
- b. Court Where Complaint was Filed: _____
- c. Court Where Case was Pending on April 2, 2001: _____
- d. Case Number: _____
- e. Date Complaint was Filed: _____
- f. Name of Your Legal Counsel: _____
- g. Address of Your Legal Counsel: _____

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (the injured person or other person or entity to whom the Debtor(s) owe money or property): OBRIEN, JOHN	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FARRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069136906	THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.	
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:	
a. Title of Case:	_____
b. Court Where Complaint was Filed:	_____
c. Court Where Case was Pending on April 2, 2001:	_____
d. Case Number:	_____
e. Date Complaint was Filed:	_____
f. Name of Your Legal Counsel:	_____
g. Address of Your Legal Counsel:	_____

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	
NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): IZZO, CAROLINE	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FARRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVENUE SUITE 300 BUFFALO NY 14202-390 	THIS SPACE IS FOR COURT USE ONLY	
10321069085218		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

(Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART I (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
<p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <ol style="list-style-type: none"> 1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates: <ol style="list-style-type: none"> a. Title of Case: _____ b. Court Where Complaint was Filed: _____ c. Court Where Case was Pending on April 2, 2001: _____ d. Case Number: _____ e. Date Complaint was Filed: _____ f. Name of Your Legal Counsel: _____ g. Address of Your Legal Counsel: _____ _____ _____ 	

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	101-01139 (JKF)	
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): BLACK, ROGER	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ, GREEN, FAHRINGER, ROLL, SAILSURY & CAMBR 42 DELAWARE AVENUE BUFFALO NY 14202-240 		
10321069030215	THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): MULVANEY, DONALD	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FABRINOER ROLL SALISBURY & CAMBHIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10921069036325	THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

<p>PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)</p> <p><input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.</p>	
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<p>PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)</p> <p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <p>1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:</p> <ol style="list-style-type: none"> Title of Case: _____ Court Where Complaint was Filed: _____ Court Where Case was Pending on April 2, 2001: _____ Case Number: _____ Date Complaint was Filed: _____ Name of Your Legal Counsel: _____ Address of Your Legal Counsel: _____ _____ _____ 	
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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKT)	
NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): WUERSTLE, ARTHUR	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FABRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240  10321069026547	THIS SPACE IS FOR COURT USE ONLY	
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
<p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <ol style="list-style-type: none"> Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates: <ol style="list-style-type: none"> Title of Case: _____ Court Where Complaint was Filed: _____ Court Where Case was Pending on April 2, 2001: _____ Case Number: _____ Date Complaint was Filed: _____ Name of Your Legal Counsel: _____ Address of Your Legal Counsel: _____ _____ _____ 	

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM	
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	<p>NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p> <p>Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): BALLARD, ROGER W</p> <p>Name and address where notices should be sent: LIPSITZ GREEN FARRINGER ROLL SALISBURY & CAMBRIA L. 42 DELAWARE AVENUE SUITE 300 BUFFALO NY 14202-390</p> <p>10321069085217</p> <p></p> <p><input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.</p> <p><input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case.</p> <p><input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court.</p> <p><input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____</p>	
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:		
			THIS SPACE IS FOR COURT USE ONLY

<p>PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)</p> <p><input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.</p>	
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<p>PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)</p> <p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <p>1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:</p> <p>a. Title of Case: _____</p> <p>b. Court Where Complaint was Filed: _____</p> <p>c. Court Where Case was Pending on April 2, 2001: _____</p> <p>d. Case Number: _____</p> <p>e. Date Complaint was Filed: _____</p> <p>f. Name of Your Legal Counsel: _____</p> <p>g. Address of Your Legal Counsel: _____ _____ _____</p>	
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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
NOTE: Use this form only if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): CASSIOL, ROBERT Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-390  10321069074631		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____.
THIS SPACE IS FOR COURT USE ONLY		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:
PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)		
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.		
PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)		
Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.		
1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:		
a. Title of Case: _____		
b. Court Where Complaint was Filed: _____		
c. Court Where Case was P: _____		
d. Case Number: _____		
e. Date Complaint was Filed: _____		
f. Name of Your Legal Counsel: _____		
g. Address of Your Legal Counsel: _____ _____ _____		

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.	01-01139 (JKF)	
NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.		
Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): JEWELL, JOSEPH J	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	
Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 900 BUFFALO NY 14202-240 	THIS SPACE IS FOR COURT USE ONLY	
10321069014802		
Last Four Digits of Creditor's Social Security Number:	If primary party is deceased, indicate date of death:	

PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)	
<input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.	

PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)	
<p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <ol style="list-style-type: none"> Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates: <ol style="list-style-type: none"> Title of Case: _____ Court Where Complaint was Filed: _____ Case Number: _____ Date Complaint was Filed: _____ Name of Your Legal Counsel: _____ Address of Your Legal Counsel: _____ 	

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form <u>only</u> If you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
<p>Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): MCNAMARA, PAUL M</p> <p>Name and address where notices should be sent: LIPSITZ GREEN FAHRINGER ROLL, SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240</p> <p style="text-align: center;"></p> <p>10321069136634</p>		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____.
THIS SPACE IS FOR COURT USE ONLY		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:
<p>PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)</p> <p><input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.</p>		
<p>PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)</p> <p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <p>1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:</p> <ol style="list-style-type: none"> a. Title of Case: _____ b. Court Where Complaint was Filed _____ c. Court Where Case was Pending on April 2, 2001: _____ d. Case Number: _____ e. Date Complaint was Filed: _____ f. Name of Your Legal Counsel: _____ g. Address of Your Legal Counsel: _____ _____ _____ 		

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should not be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
<p>Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): STUEBCHEN, JACK R</p> <p>Name and address where notices should be sent: LIPSITZ GREEN FABRINGER ROLL SALISBURY & CAMBRIA L 42 DELAWARE AVE STE 300 BUFFALO NY 14202-390</p> <p style="text-align: center;"></p> <p>10321069074633</p>	<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____	THIS SPACE IS FOR COURT USE ONLY
<p>Last Four Digits of Creditor's Social Security Number:</p>		<p>If primary party is deceased, indicate date of death:</p>
<p>PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)</p> <p><input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.</p>		
<p>PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)</p> <p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <p>1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:</p> <p>a. Title of Case: _____</p> <p>b. Court Where Complaint was Filed: _____</p> <p>c. Court Where Case was Pending on April 2, 2001: _____</p> <p>d. Case Number: _____</p> <p>e. Date Complaint was Filed: _____</p> <p>f. Name of Your Legal Counsel: _____</p> <p>g. Address of Your Legal Counsel: _____ _____ _____</p>		

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		W. R. GRACE & CO. ASBESTOS PI PROOF OF CLAIM FORM
Name of Debtor: In re W.R. Grace & Co., et al.		01-01139 (JKF)
<p>NOTE: Use this form <u>only</u> if you have a Non-Settled Pre-Petition Asbestos PI Claim or a Settled Pre-Petition Asbestos PI Claim (capitalized terms are defined in the "Notice of Bar Dates for Pre-Petition Asbestos Personal-Injury Litigation Claims (Settled and Non-Settled)"). This form should <u>not</u> be used to file a claim for a non-asbestos claim, an asbestos property-damage claim, a property-damage claim arising from Zonolite attic insulation, an asbestos medical-monitoring claim, or any other claim.</p>		
<p>Name of Creditor (The injured person or other person or entity to whom the Debtor(s) owe money or property): OHARA, MICHAEL</p> <p>Name and address where notices should be sent: LIPSITZ GREEN FARRINGER ROLL SALISBURY & CAMBRIA I. 42 DELAWARE AVE STE 300 BUFFALO NY 14202-240</p>  <p>10321069136927</p>		<input type="checkbox"/> Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check if the address differs from the address on the envelope sent to you by the court. <input type="checkbox"/> Check here if this claim amends or replaces a previously filed claim, dated _____
THIS SPACE IS FOR COURT USE ONLY		
Last Four Digits of Creditor's Social Security Number:		If primary party is deceased, indicate date of death:
<p>PART I (Election to Use W.R. Grace Asbestos Personal Injury Questionnaire as Part of Your Proof of Claim)</p> <p><input type="checkbox"/> Check here if you have completed and returned the W.R. Grace Asbestos Personal Injury Questionnaire ("Questionnaire") and elect to have the Questionnaire required by the Court's order on August 29, 2005 serve as part of your Proof of Claim. If you check this box, you do not need to complete Part II of this Proof-of-Claim Form, but you still must complete Part III if you have a Settled Pre-Petition Asbestos PI Claim. AND, IN ANY CASE, YOU MUST STILL FILE THIS FORM ON OR BEFORE OCTOBER 16, 2006 OR NOVEMBER 15, 2006, WHICHEVER OF THESE BAR DATES IS APPLICABLE TO YOU.</p>		
<p>PART II (To Be Completed by Claimants Holding Non-Settled Pre-Petition Asbestos PI Claims Who Are Not Electing to Use the Questionnaire as Part of Their Proof of Claim)</p> <p>Please complete Part II if you did not elect to have the Questionnaire serve as part of your Proof of Claim in Part I. Although completion of Part II satisfies the requirements of this Proof of Claim, it does not relieve you of the obligation to answer and return a Questionnaire.</p> <p>1. Provide the following information with respect to the pre-petition lawsuit or civil action for which your Non-Settled Pre-Petition Asbestos PI Claim relates:</p> <ol style="list-style-type: none"> a. Title of Case: _____ b. Court Where Complaint was Filed: _____ c. Court Where Case was Pending on April 2, 2001: _____ d. Case Number: _____ e. Date Complaint was Filed: _____ f. Name of Your Legal Counsel: _____ g. Address of Your Legal Counsel: _____ _____ _____ 		

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